UNITED STATES DISTRICT COURT

30 NY 2023 SE	Response From Selektron	SOUTHE	RN DIST	DISTRICT						
N	athaniel .	A Cric	chlow							
	name of the plaintiff or pe t submit a separate applica			CV	() ()				
	-ag	ainst-		(Provide docket number, if available; if filing this with your complaint, you will not yet have a docket number.)						
OLI	VIERO CONST	RUCTIO	N CORP							
JAN	IES DRAZGA									
(full i	name(s) of the defendant(s)/respondent(s								
and i	APPLICATION a plaintiff/petitioner I believe that I am ent eed in forma pauperis (in this case a itled to the re	nd declare th	at I am unable d in this action.	to pay the cost. In support of t	s of these proce his application	eedings 1 to			
	Are you incarcerated? I am being held at:	I	Yes	N	lo (If "No," g	o to Question 2	2.)			
M I d a	Do you receive any payment from this institution? Yes No Monthly amount: If I am a prisoner, see 28 U.S.C. § 1915(h), I have attached to this document a "Prisoner Authorization" directing the facility where I am incarcerated to deduct the filing fee from my account in installments and to send to the Court certified copies of my account statements for the past six months. See 28 U.S.C. § 1915(a)(2), (b). I understand that this means that I will be required to pay the full filing fee.									
2. <i>A</i>	Are you presently employed? Yes No									
I	If "yes," my employer's name and address are:									
	Gross monthly pay or wages: not applicable									
If "no," what was your last date of employment? not applicable										
G	Gross monthly wages	at the time:	not appli	cable						
li	addition to your income stated above (which you should not repeat here), have you or anyone else ing at the same residence as you received more than \$200 in the past 12 months from any of the lowing sources? Check all that apply.									
	(a) Business, profession (b) Rent payments, in			ent	☐ Yes ☐ Yes	☐ No				

	(c) Pension, annuity, or life insu	rance payments		☐ Yes	L_] No				
	(d) Disability or worker's comp	ensation paymen	ts	☐ Yes] No				
	(e) Gifts or inheritances			Yes] No				
	(f) Any other public benefits (ur food stamps, veteran's, etc.)	nemployment, so	cial security,	☐ Yes] No				
	(g) Any other sources			Yes Yes] No				
	If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future. title 12 united states code 411, all debts and obligations are to the United States									
	If you answered "No" to all of the questions above, explain how you are paying your expenses: Article 1 section 8 clause 1 of the constitution for the united states of america / Moorish Subject amenable to Moorish Jurisdiction									
4.	How much money do you have in cash or in a checking, savings, or inmate account?									
	I do not consent / Moorish Subject amenable to Moorish Jurisdiction									
5.	Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value: Title 18 United States Code section 8 / Moorish Subject amenable to									
Moorish Jurisdiction										
6.	6. Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? If so, describe and provide the amount of the monthly expense:									
	UCC 1-308 / Moorish Subj	ect amenable	to Moorish Ju	risdictio	n					
7.	List all people who are dependent on you for support, your relationship with each person, and how much you contribute to their support (only provide initials for minors under 18): not applicable / all rights reserved									
8.	Do you have any debts or financial obligations not described above? If so, describe the amounts owed and to whom they are payable:									
non tax obligatory nobleman / Article 1 section 10 clause 1, no state shall make any Thing but gold and silver Coin a Tender in Payment of Debts. Declaration: I declare under penalty of perjury that the above information is true. I understand that a false statement may result in a dismissal of my claims.										
09	/05/2023	. .	J. American G.	Urigh	t reser	eX				
Dat			Signature	, , , , , , , , , , , , , , , , , , ,						
	richlow,Nathaniel,A									
	me (Last, First, MI)	3a.aa.a.i.a.a	Prison Identification			`				
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	dress L8) 603-0791	City	St	ate	Zip Code					
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